

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Ball Memorial HospitalCity: Muncie County: Delaware Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	14	254	3,149	\$20,325
ICU Med/Surg	17	275	5,060	\$29,519
ICU Neonatal	18	249	3,528	\$18,329
ICU Pediatric	0	0	0	\$0
Medical/Surgical	218	12,329	58,014	\$3,135
Neonatal Intermed	0	0	0	\$0
Obstetrics	19	1,907	5,259	\$1,509
Pediatric	14	790	1,761	\$1,693

Psychiatric	21	781	4,058	\$3,617
Rehabilitation	24	406	3,604	\$5,075
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	345	16,991	84,433	NA
Normal Newborn	0	0	0	\$0

II. Outpatient Visits			
Circulatory System	9,468	Digestive System	6,332
Endocrine System	6,243	Injuries and Poison	15,556
Mental Disorder	2,003	Musculoskeletal	16,120
Neoplasms	5,063	Nervous	6,719
Respiratory	8,212	Urinary	15,976
Other/Unknown	78,332	Total Visits	170,024
Number of Visits to Emergency Department			52,608
Percent of Emergency Department Visits of Total Visits			30.9%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

Y - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Audiology	Y - Blood Bank	Y - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
Y - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
Y - Ophthalmic Surgery	N - Optometric Service	Y - Organ Bank
Y - Organ Transplant	Y - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	Y - PET Imaging	Y - Postoperative Recovery
Y - Psychiatric Emergency	Y - Psychiatric Child	N - Psychiatric Forensic
Y - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
Y - Reconstructive Surgery	Y - Respiratory Care	Y - Rehab Inpat CARF
N- Rehab Inpat Non CARF Acc	Y- Rehab Outpatient	Y- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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